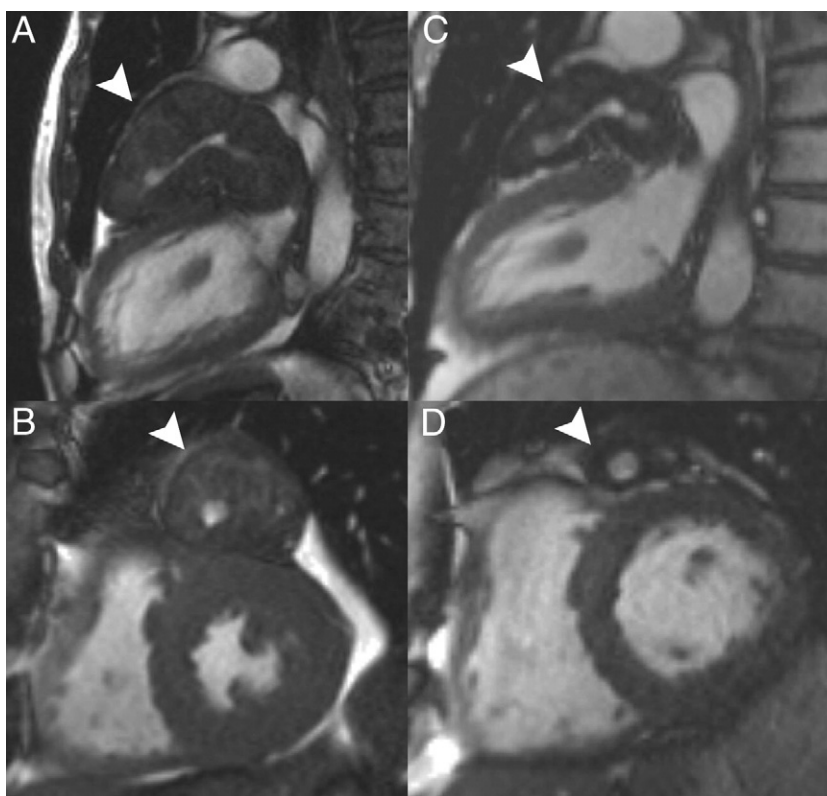


## IMAGES IN CARDIOLOGY

# Epicardial Lymphoproliferative Disease Involving the Coronary Arteries

Moritz C. Wyler von Ballmoos, MD, MPH, Saqib Masroor, MD, MHS, Ghulam Murtaza, MD, Jose Franco, MD, Mario Gasparri, MD, Jason C. Rubenstein, MD

*Milwaukee, Wisconsin*



From the Medical College of Wisconsin, Milwaukee, Wisconsin.

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**A** 67-year-old male patient with a history of liver transplant, autoimmune pancreatitis, primary sclerosing cholangitis, and Mikulicz disease presented with fatigue, dyspnea, and chest pain. Cardiac magnetic resonance (CMR) imaging revealed a large mass surrounding the distal left main, left anterior descending, and circumflex coronary arteries. Three-chamber (**A**, [Online Video 1](#)) and short-axis (**B**, [Online Video 2](#)) steady-state free-precession (SSFP) CMR images demonstrate the tumor (**arrowheads**) at baseline (diameter:  $80 \times 52$  mm).

Biopsy of the mass revealed hyper-immunoglobulin G (IgG) disease. This is an IgG4-positive multifocal lymphoproliferative syndrome characterized by fibrosis, dense lymphoplasmic infiltrates, obliterative vasculitis, and elevated serum IgG4 levels and responsive to chemotherapy with glucocorticosteroids. Three-chamber (**C**, [Online Video 3](#)) and short-axis SSFP CMR images (**D**, [Online Video 4](#)) are shown after a 3-month course of prednisone (mass diameter:  $64 \times 44$  mm).